AD_____

GRANT NUMBER: DAMD17-94-J-4294

TITLE: University of Kansas Cancer Center Breast Tissue and Serum Repository Core Facility

PRINCIPAL INVESTIGATOR: Jonathan J. Li, Ph.D.

CONTRACTING ORGANIZATION: University of Kansas Medical Center
Kansas City, Kansas 66160-7700

REPORT DATE: October 1996

TYPE OF REPORT: Annual

PREPARED FOR: Commander
U.S. Army Medical Research and Materiel Command
Fort Detrick, Frederick, Maryland 21702-5012

REPORT DOCUMENTATION PAGE

Form Approved
OMB No. 0704-0188

1. AGENCY USE ONLY *(Leave blank)*	2. REPORT DATE	3. REPORT TYPE AND DATES COVERED
	October 1996	Annual (23 Sep 95 - 22 Sep 96)

4. TITLE AND SUBTITLE
University of Kansas Cancer Center Breast Tissue and Serum Repository Core Facility

5. FUNDING NUMBERS
DAMD17-94-J-4294

6. AUTHOR(S)
Jonathan J. Li, Ph.D.

7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)
University of Kansas Medical Center
Kansas City, Kansas 66160-7700

8. PERFORMING ORGANIZATION REPORT NUMBER

9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)
Commander
U.S. Army Medical Research and Materiel Command
Fort Detrick, Frederick, Maryland 21702-5012

10. SPONSORING/MONITORING AGENCY REPORT NUMBER

11. SUPPLEMENTARY NOTES

12a. DISTRIBUTION / AVAILABILITY STATEMENT
Approved for public release; distribution unlimited

12b. DISTRIBUTION CODE

13. ABSTRACT *(Maximum 200*

The newly established Division of Etiology and Prevention of Hormonal Cancers, Kansas Cancer Institute (KCI), has further developed in the second year of U.S. Army Medical Research and Development support a Breast Tissue and Serum Repository Core Facility (BTSR) to facilitate and foster breast cancer-related research at KCI and other research institutions in the Southern Plains States. To date, the BTSR has collected multiple malignant, nonmalignant, and normal breast tissue specimens, as well as serum and lymphocyte specimens from all consenting surgical patients. The collection and cataloging of endometrial and ovarian malignant and nonmalignant tissues and blood has also been initiated. For each patient specimen, whether serum or tissue, a personal health history form has been completed when possible. In addition, physician records of each patient are available if the information contained therein is needed by investigators. Patient confidentiality is strictly maintained, and patients' identities are not available to users of the BTSR Core Facility. A committee, comprising both clinical and basic science faculty, reviews proposals for basic science and clinical studies.

14. SUBJECT TERMS	15. NUMBER OF PAGES
Breast Cancer	27
	16. PRICE CODE

17. SECURITY CLASSIFICATION OF REPORT	18. SECURITY CLASSIFICATION OF THIS PAGE	19. SECURITY CLASSIFICATION OF ABSTRACT	20. LIMITATION OF ABSTRACT
Unclassified	Unclassified	Unclassified	Unlimited

FOREWORD

Opinions, interpretations, conclusions and recommendations are those of the author and are not necessarily endorsed by the U.S. Army.

____ Where copyrighted material is quoted, permission has been obtained to use such material.

____ Where material from documents designated for limited distribution is quoted, permission has been obtained to use the material.

____ Citations of commercial organizations and trade names in this report do not constitute an official Department of Army endorsement or approval of the products or services of these organizations.

____ In conducting research using animals, the investigator(s) adhered to the "Guide for the Care and Use of Laboratory Animals," prepared by the Committee on Care and use of Laboratory Animals of the Institute of Laboratory Resources, national Research Council (NIH Publication No. 86-23, Revised 1985).

__✓__ For the protection of human subjects, the investigator(s) adhered to policies of applicable Federal Law 45 CFR 46.

____ In conducting research utilizing recombinant DNA technology, the investigator(s) adhered to current guidelines promulgated by the National Institutes of Health.

____ In the conduct of research utilizing recombinant DNA, the investigator(s) adhered to the NIH Guidelines for Research Involving Recombinant DNA Molecules.

____ In the conduct of research involving hazardous organisms, the investigator(s) adhered to the CDC-NIH Guide for Biosafety in Microbiological and Biomedical Laboratories.

10/20/96

PI - Signature Date

TABLE OF CONTENTS

INTRODUCTION

The cause(s) of breast cancer and the means to predict who will develop it are currently not well understood. Understanding of either or both is an essential step to successful prevention of this prevalent disease in the future. Similarly, there is a paucity of knowledge related to early detection of breast cancer, because screening procedures, while improving, do not allow detection of breast cancer at the earliest and most curable stages. The development of the BTSR Core Facility at the KCI-KUMC is an important step to address these issues at this institution.

Development of the BTSR is highly relevant to expansion and augmentation of breast cancer research, including clinically-related and basic, at the Kansas Cancer Institute (KCI) and University of Kansas Medical Center (KUMC). The BTSR's purpose is to facilitate investigator-initiated research to perform correlation studies on the incidence of possible premalignant and malignant breast lesions with genetic and variable biomarkers (e.g., receptors, hormones, cellular proteins, protooncogenes, and tumor suppressor genes, etc.); and to assess the presence of potential carcinogens.

A focus of the newly created Division of Etiology and Prevention of Hormonal Cancers (DEPHC) is to assist, complement, and expand existing, ongoing programs and to develop new programs in molecular biology and molecular cytogenetics in breast cancer research at KCI. A central emphasis of this Division is that hormones, particularly estrogens and progestin, play a critical role in breast tumor causation, progression, and dependency. Hormonal involvement in breast cancer etiology at the cellular and molecular level is not well understood and requires elucidation.

BODY

I. Background

After a delayed start as detailed in our previous report, the KCI-BTSR has been operational for 17 months and is making excellent progress. Drs. Jonathan Li and Walter Imagawa continue as Director and Associate Director, respectively, and Ms. Leslie Hudson continues as Biologist II. Ms. Julianne Heaston replaced Ms. Rhonda Doolittle as secretary on March 18, 1996.

II. Experimental Methods

Tissue Samples

Tissue samples for the KCI-BTSR are acquired from patients who have breast biopsies, lumpectomies, mastectomies, or breast reduction surgery, and also from women who undergo hysterectomy and/or oophorectomy for malignant and nonmalignant conditions. Ms. Leslie Hudson, the BTSR biologist, acquires the daily surgical schedule for all breast surgeries and is present in the Surgical Pathology Laboratory during the processing of the breast specimens. These are handled in a timely fashion in order to preserve the tissues appropriately. The breast tissue, normal, abnormal, and neoplastic, is placed on a frozen cutting board provided by the BTSR. The breast tissue specimens are delivered to the Surgical Pathology Laboratory within 10 min. A certified pathologist immediately evaluates the tumor, and a frozen section is prepared for diagnosis. The pathologist then cuts tumor/normal tissue specimens for the repository biologist if sufficient sample is available.

If there is sufficient tissue sample, one portion is allocated for frozen sections. Tissue samples destined for frozen section are covered with tissue-embedding medium in a cryomold, then placed in an airtight polypropylene container, labeled with a proper bar-code label (specimen-specific identification number--please see below), and immediately snap-frozen in an N_2 container before storage in the BTSR freezer. The remaining tissue sample is similarly labeled and snap-frozen in a polypropylene container.

Each specimen is assigned a unique six-digit specimen-specific identification number. The first digit is unique and refers to the type of specimen: tumor tissue, healthy adjacent tissue, tissue from a breast reduction surgery, or serum. The remaining five-digit number is assigned sequentially, with biopsy tissue, healthy adjacent tissue, and serum for a particular patient assigned the same five digits. All breast tissue aliquots derived from the same tissue are assigned the same six-digit number. This six-digit specimen-specific identification number is shown on the bar-code with which the biologist labels each container and slide.

A Surgical Pathology requisition form is computer generated by the Surgery Department and accompanies the specimen when it is delivered to the Pathology Laboratory. Information included on this form consists of hospital patient identification number, surgeon's name, patient's name and age, date of surgery, and site of specimen. In addition, Surgical Pathology personnel write the Surgical Pathology identification number on the requisition form, and the surgical pathologist measures the tumor before it is divided, indicating the size of the tumor. The repository records the repository specimen-specific identification number on the requisition form. The BTSR biologist

makes a copy of this form in the Pathology Laboratory and takes it to the BTSR along with the specimens. These data will eventually be entered into the BTSR database.

The following tests are routinely carried out on all breast biopsy samples at KUMC (see protocol, p. 12):

(1) estrogen and progesterone receptor analysis;

(2) immunostaining for p53, HER-2/neu, and cathepsin;

(3) ploidy analysis by flow cytometry or image analysis;

(4) actual Surgical Pathology analysis, including a thorough analysis of tumor characteristics, histological type, histological grade, size, etc.

BTSR personnel can retrieve the results of all these tests as soon as they are available and enter the information into the BTSR database, as described below in Cataloging and Storage. Results from test (1) above are obtained from the Clinical Laboratory and test (4) results from the Flow Cytometry Laboratory, while those of the remaining tests are obtained from the Surgical Pathology Department.

Serum Samples

Blood samples both from women having breast surgery and from women at the KCI High Risk Breast Clinic will be submitted to the BTSR. The procedure described below is followed for each group of women.

Three days before a patient is scheduled to have breast surgery, she is required to go to the Outpatient Laboratory to have her blood drawn for various presurgical tests. It is the BTSR biologist's responsibility to secure the schedule of these visits in advance from the surgeons' scheduling nurse and to advise the Outpatient Laboratory to draw one extra vial of blood from each of these patients for the BTSR. The BTSR biologist is stationed in the Outpatient Laboratory at the time of each of these appointments to be sure that this extra blood is drawn and to label the blood vials with the proper outpatient laboratory labels, which include the patient's name and hospital patient identification number.

In addition, the BTSR biologist gives the patient consent forms for donating blood to the BTSR, asking the patient to sign these and to complete the Personal Health History questionnaire described in detail below under Storage and Cataloging. After the patient completes the questionnaire, the

BTSR biologist writes the six-digit specimen-specific identification number on the upper right-hand corner of the front page of the questionnaire.

Women who are considered at high risk for breast cancer are eligible to participate in the KCI High-Risk Breast Clinic. In general, eligible women include those between 30 and 55 years of age who have at least one of the following conditions: a first-degree relative who has had breast cancer, or, in herself, precancerous mastopathy or prior node-negative breast cancer in one breast.

The High-Risk Breast Clinic is located at the KU Cancer Center Comprehensive Outpatient Diagnostic and Treatment Center. During each patient's first visit to the clinic, blood is drawn for various medical tests. The BTSR biologist is responsible for securing the schedule of these visits in advance and advising the clinic to draw one extra vial of blood from each new patient for the Serum Repository. The identical procedure described above for securing the blood and completed questionnaire from breast surgery patients at the Outpatient Laboratory is also followed for new patients seen at the High-Risk Breast Clinic.

When blood specimens are received at the BTSR, the biologist processes the blood before the specimens are cataloged and stored in the freezer. After spinning down the reamed whole clotted blood in a refrigerated centrifuge, she removes the vial cap and, with a sterile pipette, divides the sera into 1.5-ml aliquots in the polypropylene containers. Each container is then labeled with the proper bar-code label and snap-frozen. Three times a day, the labels are scanned and the appropriate data entered into the Biopsy Serum Table, the Reduction Mammoplasty Serum Table or the High Risk Serum Table, depending on the source of the serum.

The specimen-specific number on the bar-code label will have been assigned to all specimens obtained. The six-digit identification number is identical to the number assigned to the tissue specimen for the same patient, when applicable.

Similar procedures have been developed for the collection of tissues and blood from gynecological patients. The questionnaire used for breast patients has been modified for these patients.

Lymphocyte Samples

The BTSR has the capacity to separate and freeze lymphocytes from peripheral blood when a special request is received. Blood will be collected in heparin- or EDTA-containing tubes. A 10-ml tube is necessary. Preferably, two hours after blood collection, the procedure detailed on p. 10 should be followed.

After all serum and lymphocytes are separated and labeled, the BTSR biologist then stores the tissue and serum samples in the freezer and records all data regarding storage location in the Location Table of the database. These data include specimen identification number and sample location, including freezer shelf, box and cubicle number. This will allow the BTSR staff to locate all specimens quickly and easily.

Storage and Cataloging

When a tissue sample is received at the KCI-BTSR, specimen bar codes are scanned into the Biopsy Table, the Healthy Adjacent Table, or the Reduction Mammoplasty Table of the Repository Database, as appropriate; the unique hospital patient identification number, the date that the specimen is received by the BTSR, the hospital of origin, the total amount of tissue, the surgical date, and all other data shown on the surgical requisition form that accompanies each specimen are then keyed in.

All specimen-specific and patient-specific data are maintained in the computerized Repository Database Management system, developed by the Program Database Leader using FoxPro for Windows, a database management software package. FoxPro is a relational database system that allows for various files in the system to be linked by means of key fields. In the Repository Database, the key fields are the unique specimen number and a combination of the hospital patient identification number and the hospital number. This combination serves as a unique patient identifier. Any or all of the tables within the database are linked using these three fields.

When a patient questionnaire is delivered to the Repository, it is initially labeled with the appropriate bar code. The first digit of the six-digit identification number reflects that this is a questionnaire, while the remaining five digits match those of the other specimens for the same patient. The questionnaire labels are then scanned and the data entered into the Demographic/Life Style Table. Responses to this questionnaire will be extremely valuable to many research investigators who will be using the BTSR breast specimens. The data requested include demographic, physical, and lifestyle information. Specifically, questions concern age, racial/ethnic background, marital status, religion, weight, height, education, occupation, family income, family history of breast cancer, age at first period, and menopausal, childbirth, lactation and alcohol history. To maintain confidentiality, all questionnaires are filed and locked up in a secure location after the data are entered into the database.

RESULTS

During the past year, the repository has substantially increased its inventory of breast tissues and blood products. The total number of breast, endometrial, and ovarian tissue specimens with

accompanying serum samples and histology blocks is summarized on page 13. The repository now has in storage 39 specimens of malignant breast tissue, 56 specimens of nonmalignant breast tissue (e.g., fibroadenoma, fibrocystic, etc.), and 9 normal specimens from breast reductions. The repository has also begun collecting endometrial and ovarian tissues and blood products from patients undergoing gynecological surgery. For endometrial and ovarian tissue, 6 malignant and at least 30 nonmalignant specimens of each type are currently in storage.

The collection of serum and lymphocyte specimens has also accelerated over the past year as summarized on page 14. The total serum and lymphocyte samples for breast tissues has increased, and now, 77 and 19 specimens, respectively, are stored and available. For surgical patients from whom tissue is not available, blood is still collected for the repository. However, serum is not always available from patients due to patient refusal. Total serum and lymphocyte samples for endometrial and ovarian tissue now number more than thirty.

On pages 15-24 is listed the current inventory of the KCI-BTSR, indicating the bar coding of samples and sample location in the repository freezer.

Currently, only investigators at KUMC have access to specimens from the repository:

Investigator	**% Estimated Use**	**Research Support**
Jonathan J. Li, Ph.D. Sara Antonia Li, Ph.D.	5%	NCI 5 R01 CA 58030-04 NCI 1 R01 CA 64047-03
Walter T. Imagawa, Ph.D.	10%	ACS RD-55, NCI CA 68414-01
Gregory Reed, Ph.D.	10%	Dept. of Pharmacology institutional funds
Carol Fabian, M.D.	15%	NCI PO1 CA 72094 NCI UO1 CA 72296 NCI MAA NCI CN 45593-32 NCI N01 CN 65024-32

CONCLUSIONS

The repository has successfully established itself with a growing inventory and database. In addition, the collection of tissue specimens from gynecological cancers has expanded the utility of the repository to a broader range of investigators.

Future Goals

1. Increase collection of breast tissue by outreach to other local hospitals.

2. Call for breast, serum, and lymphocyte proposals from investigators at KUMC (Kansas City), Kansas State University (Basic Cancer Center), and KUMC (Wichita) (Women's Health Institute). A multidisciplinary review committee for this purpose has been assembled (p. 9) now that the KCI-BTSR is completely functional.

3. Expand collection of human tumor specimens to prostate, colon, thyroid, pancreas, liver, and testicular cancers and corresponding normal tissues, as well as corresponding serum and lymphocyte samples. Since a number of KUMC investigators have research interests in cancers at these organ sites, it seems useful to expand cancer research studies at KUMC by making these tumors available to all interested investigators.

APPENDIX

KCI-BTSR Committee on Human Tissue Specimen Usage

William Jewell, M.D. - Surgeon (breast), Professor and Director, Kansas Cancer Institute
Jonathan J. Li, Ph.D. - Director, BTSR Core Facility, Professor
Sara Antonia Li, Ph.D. - Hormonal Carcinogenesis Researcher, Associate Professor
Janet Woodroof, M.D. - Pathologist, Assistant Professor
Walter Imagawa, Ph.D. - Breast Cancer Researcher and Associate Director, BTSR Core Facility, Assistant Professor
Carol Fabian, M.D. - Medical Oncologist (breast), Professor
Cooley Pantazis, M.D. - Chief, Surgical Pathology, Associate Professor

Lymphocyte Separation

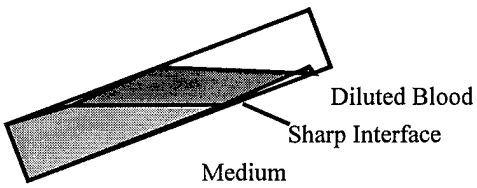
Collect blood in a 10ml heparin or EDTA containing vacutainer tubes.
Preferably, two hours after blood collection, follow this procedure:

1. Pipet 4-5mL Histopaque-1077 into each of four 15mL centrifuge tubes;
2. Draw 3mL Hank's Solution into pipet, then 2-3mL whole blood and place in 15mL centrifuge tube. Add an additional 4mL Hank's Solution to tube, cap and mix by gently inverting tube. Prepare 4 tubes this way;
3. Tilt tube in #1 and add blood mixture so as to create a sharp interface;
4. Centrifuge at 400 x g (approx. 1400 rpm) for 30 minutes at room temperature;
5. After the centrifugation, draw off the opaque interface, being careful not to collect any of the medium below, and transfer to 15mL centrifuge tube containing approximately 5mL Hank's Solution. Mix by gently inverting capped tube, then fill tube with Hank's Solution;
6. Centrifuge at 250 x g (approx. 1000 rpm) for 10 minutes at room temperature;
7. Discard supernatant;
8. Resuspend pellet in 5 mL of Hank's Solution (mix using pipet - aspirations and vortexing);
9. Centrifuge at 250 x g (approx. 1000 rpm) for 10 minutes at room temperature;
10. Discard supernatant;
11. Resuspend pellet in 0.5 mL of Hank's Solution
12. Determine cell count using Crystal Violet (Stain 0.05mL cell solution with 0.45mL Crystal Violet and vortex for 20 sec.); Count number of stained cells in hemocytometer (determine total cells);
13. Put cells in bar code-labelled vial;
14. Freeze at -80°C.

Notes: Steps 5-11 are washing steps only.
For questions contact Dean Merkel in Hematology (pager #7014).
Blood dilution in step #1 useful in preventing loss of white cells in high concentration of red cells.

Materials needed:

15 ml capped centrifuge tubes
Histopaque-1077
Hank's Solution
Crystal Violet
5mL pipets
1mL pipets
200uL micropipet



Serum Separation

Collect blood in 10ml Serum Separator Tubes.
Allow to sit at room temperature for 1 - 2 hours and follow this procedure:

1. Centrifuge at 1500 rpm for 15 minutes at 4°C;
2. Aliquot 1.5 mL serum into each bar code-labelled, chilled vial, noting in database amount in last vial if not 1.5 ml.
3. Freeze at -80°C.

INVASIVE MAMMARY CARCINOMA PROTOCOL

Tumor size <1cm in greatest diameter:

1) Scrape for ploidy by image analysis, take to image room (Marilyn or Julie) [a]
2) Scrape for flow cytometry (call Bill Justice -3876) [b]
3) Order ER/PR, MIB-1, p53, HER-2/neu, cathepsin immunostains (give req to Julie) [c]

Tumor size 1 to 1.5cm in greatest diameter:

1) Scrape for ploidy by image analysis, take to image room (Marilyn or Julie) [a]
2) Scrape for flow cytometry (call Bill Justice -3876) [b]
3) Send 0.5cm piece of tumor for ER/PR EIA (call metabolic lab) [d]
4) Order MIB-1, p53, HER-2/neu, cathepsin immunostains (give req to Julie) [c]

Tumor size 1.5 to 2.0cm in greatest diameter:

1) Scrape for ploidy by image analysis, take to image room (Marilyn or Julie) [a]
2) Send 0.5cm piece of tumor for ER/PR EIA (call metabolic lab) [d]
3) Place a 0.5cm piece of tumor into RPMI for flow cytometry (call Bill Justice -3876) [e]
4) Order MIB-1, p53, HER-2/neu, cathepsin immunostains (give req to Julie) [c]

Tumor size >2.0cm in greatest diameter:

1) Scrape for ploidy by image analysis, take to image room (Marilyn or Julie) [a]
2) Send 0.5cm piece of tumor for ER/PR EIA (call metabolic lab) [d]
3) Place a 0.5cm piece of tumor into RPMI for flow cytometry (call Bill Justice -3876) [e]
4) Order MIB-1, p53, HER-2/neu, cathepsin immunostains (give req to Julie) [c]
5) Submit 0.5cm of tumor to Oncotech (in Oncotech media).
5) Submit at least 0.5cm of tumor to the breast tumor bank (Leslie Hudson).

[a] Scrape for ploidy by image analysis. Scrape tumor with surgical blade and place material in the middle of a superfrost slide; using another superfrost slide, gently smear the material across the slide, and let air dry. Take the slide and a copy of the requistion to the image analysis room. Page Marilyn Davis if you have questions (6098).

[b] Scrape tumor for flow cytometry. Use a small amount of pressure when scraping. After each of 6 scrapes (3/tumor slice) immerse the scalpel blade in RPMI medium and shake the blade to dislodge the cells. Place the sample in the refrigerator with a copy of the requistion, and call Bill Justice (ext 3876).

[c] Order ER/PR, MIB-1, p53, HER-2/neu, and cathepsin immunostains on a paraffin block (block in which the tissue opposite the frozen section is submitted). Do not order on frozen section block unless it is the only block with tumor.

[d] Place a 0.5cm piece of tumor into a labeled plastic bag and freeze immediately in liquid nitrogen. Fill out green requistion requesting "ER/PR". Call metabolic lab (7020) to send out to Roche.

[e] Place a 0.5cm piece of tumor into RPMI for flow cytometry. Call Bill Justice (ext 3876).

Breast Tissue and Serum Repository

Specimen Update 10/18/96

Tissues

	BREAST TISSUE		
	Malignant	Non-Malignant	Normal
Total Samples	39	57	9
Blood Samples*	24	19	1
Histology Blocks	13	17	2
Complete Sets	10	9	1

*Blood not obtained due to patient decline to consent.

	ENDOMETRIAL TISSUE	
	Malignant	Non-Malignant
Total Samples	6	32
Blood Samples	5	30
Histology Blocks	2	12
Complete Sets	2	12

	OVARIAN TISSUE	
	Malignant	Non-Malignant
Total Samples	6	39
Blood Samples	6	34
Histology Blocks	3	19
Complete Sets	3	18

Blood Products

	Breast		
	Total Samples	Malignant	Non-Malignant
Serum Samples	77	48	28
Lymphocyte Samples	65	38	25

	Endometrium		
	Total Samples	Malignant	Non-Malignant
Serum Samples	34	5	31
Lymphocyte Samples	32	5	29

	Ovary		
	Total Samples	Malignant	Non-Malignant
Serum Samples	37	6	34
Lymphocyte Samples	36	6	33

SAMPLE LOG

Malignant and Non-Malignant Tissue

Breast

Bar Code	Date of Procedure	Age of Patient	# Vials	Sample Location
100000	5/12/95	72	2	1A1.1-2 malignant tissue
100001	5/17/95	76	1	1A1.3 malignant tissue
100009	6/5/95	46	1	*1A1.4 malignant tissue
100011	6/5/95	28	7	1A1.5-6, 1B1.1-5 malignant tissue
100018	8/16/95	43	13	1A1.7-19 (mastectomy w/non-malignant tissue)
100020	8/16/95	52	1	1A1.20 malignant tissue
100022	9/8/95	47	5	1A1.21-25 (mastectomy - only 1A1.25 contains malignant tissue
000003	9/8/95	71	9	1A1.26-34 (mastectomy w/non-malignant tissue)
000004	9/1/95	60	3	1A1.35-37 malignant tissue
000005	9/20/95	46	5	1A1.38-42 non-malignant tissue
000007	9/1/95	37	1	*1B4.2 non-malignant
000011	9/25/95	60	2	1A1.43-44 malignant tissue
000013	10/18/95	77	1	1A1.51 non-malignant tissue
000014	11/3/95	83	2	1A1.45-46 non-malignant tissue (male)
000016	11/8/95	42	1	1A1.47 non-malignant tissue
000017	10/24/95	43	1	1A1.48 malignant tissue
000018	11/21/95	42	4	1A1.69-72 non-malignant tissue
000019	10/26/95	52	1	1A1.49 malignant
	11/27/95		14	1A1.55-65,1B2.1-3 non-malignant
000023	11/21/95	31	1	1A1.50 malignant
000024	12/1/95	26	1	1A1.52 non-malignant
000027	12/8/95	33	1	1A1.53 non-malignant
000029	12/18/95	59	1	1A1.54 malignant
000030	12/20/95	22	1	1A1.73 non-malignant
000031	12/20/95	58	1	1A1.66 malignant
000032	12/29/95	55	1	1A1.67 malignant
000033	2/19/96	36	1	1A1.68 malignant
000036	12/22/95	83	1	*1A2.37 malignant
000039	1/26/96	44	4	*1A2.38-41 malignant
000040	1/29/96	47	9	1A2.4-8 (L) non-malignant, 1B2.4-7 (R) non-malignant (presence of i.s.possible)
000041	11/29/95	42	1	1A1.74 non-malignant
000057	3/27/96	53	1	1A2.9 non-malignant
000060	11/8/95	49	2	1A1.76-77 malignant
	2/26/96		7	1A1.78-81,1A2.1-3 non-malignant
000063	3/13/96	58	1	1A1.75 non-malignant
000064	4/1/96	56	4	1A2.13-16 non-malignant (presence of malignant possible)
000066	3/25/96	25	1	1A2.10 non-malignant
000070	3/13/96	76	2	1A2.11-12 malignant
000074	3/25/96	42	1	1A2.25 non-malignant
000078	4/15/96	44	2	1A2.17-18malignant & non-malignant
000080	3/27/96	34	1	1A2.32 malignant
000081	4/22/96	83	1	1A2.19 non-malignant
000083	5/1/96	49	3	1A2.20,21-22 malignant
000091	1/19/96	64	1	1A2.26 malignant
000095	5/22/96	51	1	1A2.23microcalcifications
000096	5/20/96	33	1	1A2.27 non-malignant
000104	6/10/96	45	4	1B3.6-9 non-malignant
000111	4/3/96	55	1	1A2.24 malignant

000117	7/1/96	69	2	1A2.61-62 malignant and non-malignant
000126	8/9/96	41	1	1A2.28 malignant
000128	2/7/96	69	1	1A2.42 malignant
000129	8/26/96	25	1	1A2.31 non-malignant
000139	9/9/96	47	1	1A2.33 malignant
000141	9/16/96	41	1	*1A2.63 malignant
000142	9/23/96	43	1	1A2.64 malignant
000143	9/16/96	32	1	1A2.65 non-malignant
000144	9/16/96	27	1	1A2.66 non-malignant
000146	9/18/96	65	1	1A2.67 non-malignant
000148	9/18/96	76	1	1A2.68 non-malignant
000149	9/10/96	56	1	1A2.69 malignant
000151	9/30/96	40	1	1A2.70 non-malignant
000152	10/2/96	36	1	1A2.71 malignant
000154	4/10/96	70	4	*1A2.72 non-malignant
000155	8/5/96	55	1	*1A2.29 malignant
000157	8/28/96	44	1	*1A2.30 non-malignant
000160	4/17/96	32	3	*1A2.34-35 non-malignant and 1A2.36 malignant
000164	5/13/96	53	2	*1B4.5-6 non-malignant (Breast Reduction for Fibrocystic Disease)
000166	12/6/95	23	1	*1A2.43 non-malignant
000167	10/2/95	40	1	*1A2.44 non-malignant
000168	2/26/96	32	2	*1B4.3-4 non-malignant
000170	11/4/96	25	1	*1A2.45 non-malignant
000171	10/6/95	54	1	*1A2.46 malignant
000172	2/28/96	36	1	*1A2.47 non-malignant
000173	3/6/96	55	5	*1A2.48-52 non-malignant
000174	12/13/95	50	1	*1A2.53 malignant
000175	3/25/96	73	1	*1A2.54 non-malignant
000176	3/18/96	40	2	*1A2.55-56 non-malignant
000177	10/16/95	81	1	*1A2.57 malignant
000179	3/25/96	61	1	*1A2.58 non-malignant
000181	9/8/95	31	1	*1A2.59 non-malignant
000182	4/22/96	34	1	*1A2.60 malignant
000185	5/22/96	17	1	*1A2.73 non-malignant
000186	6/19/96	39	1	*1A2.74 non-malignant
000187	5/6/96	74	1	*1A2.75 malignant
000188	5/6/96	35	1	*1A2.76 non-malignant
000189	9/11/96	37	1	*1A2.77 non-malignant
000190	6/10/96	26	1	*1A2.78 non-malignant
000191	6/19/96	35	1	*1A2.79 non-malignant
000192	4/24/96	58	1	*1A2.80 non-malignant
000193	7/8/96	47	1	*1A2.81 non-malignant
000194	10/18/95	77	1	*1A3.1 non-malignant
000195	4/24/96	46	4	*1A3.2-5 non-malignant
000196	7/8/96	63	1	*1A3.6 malignant
000197	4/24/96	49	1	*1A3.7 non-malignant
000198	10/14/96	36	1	1A3.8 non-malignant

Gynecologic

Bar Code	Date of Procedure	Age of Patient	# Vials	Sample Location
000037	1/22/96	65	2	2A1.1, 2B1.1 malignant endometrium
000038	1/24/96	42	2	2A1.2, 2B1.2 malignant ovary, cervical metastasis in omentum
000042	1/30/96	42	5	2A1.3-6, 2B1.3 non-malignant endometrium
000043	1/30/96	34	1	2A1.7 non-malignant endometrium
000044	1/31/96	46	1	2A1.8 non-malignant endometrium
000045	2/6/96	28	3	2A1.9, 2B1.4-5 malignant cervix, non-malignant right and left ovary
000046	2/7/96	54	4	2A1.10-13 non-malignant endometrium
000047	2/8/96	11	3	2B1.6-8 malignant ovary
000048	2/8/96	53	3	2A1.14-15, 2B1.9 malignant ovary, metastasis in peritoneum, non-malignant endometrium
000050	2/16/96	55	3	2B2.1,2A1.16-17 in situ carcinoma endometrium, non-malignant ovary
000051	2/16/96	37	2	2B2.2-3 non-malignant ovary, non-malignant endometrium
000052	2/21/96	49	3	2A1.18-20 non-malignant endometrium, non-malignant ovary
000053	2/27/96	72	2	*2A1.21, 2B2.4 non-malignant endometrium
000054	2/27/96	62	2	*2A1.22-23 non-malignant ovary
000061	3/12/96	37	1	*2A1.24 non-malignant endometrium
000065	3/20/96	33	1	2A1.25 non-malignant fallopian tube
000067	3/25/96	35	3	2A1.26-28 non-malignant endometrium, right and left ovary
000069	3/26/96	53	2	*2A1.37-38 malignant peritoneal tumor nodules (metastatic ovarian cancer)
000071	4/2/96	80	3	2B2.5-7 endometrium
000072	4/2/96	43	4	2A1.39-41, 2B2.8-9 non-malignant endometrium, malignant and non-malignant ovary
000075	4/16/96	58	3	2A1.42-44 malignant endometrium, non-malignant ovary
000079	4/22/96	68	4	2A1.29, 2A1.45-47 non-malignant endometrium and ovary, malignant endometrium
000087	5/6/96	41	4	2A1.30-33 non-malignant endometrium, ovary
000088	5/7/96	37	2	2A1.48-49 ovary
000089	5/8/96	70	2	*2B3.1-2 malignant ovary
000090	5/14/96	36	1	2A1.50 non-malignant endometrium
000097	6/5/96	32	1	2A1.34 non-malignant cervix
000098	6/5/96	30	2	2A1.35-36 non-malignant other
000100	6/18/96	45	6	2A2.4-9 malignant endometrium, non-malignant endometrium, ovary, lymph node
000101	6/19/96	65	1	2A2.10 non-malignant ovary
000103	7/2/96	40	6	2A1.78-81, 2A2.1-2 malignant cervix, non-malignant endometrium, ovary, lymph node
000106	6/24/96	70	4	2A1.58-61 malignant and non-malignant endometrium
000107	6/26/96	54	2	2A1.62-63 non-malignant ovary
000108	7/5/96	69	3	*2A2.11-13 non-malignant ovary and fallopian tube
000109	7/5/96	57	2	2A2.14-15 non-malignant ovary
000110	7/9/96	56	4	2A2.16-19 non-malignant endometrium, ovary, lymph node

000112	7/11/96	49	2	*2A2.20-21 non-malignant ovary, lymph node
000113	7/12/96	41	2	2A1.68-69 non-malignant ovary
000114	7/15/96	30	2	2A1.70-71 non-malignant endometrium, lymph node
000118	7/24/96	52	2	*2A1.64-65 non-malignant ovary
000119	7/30/96	63	5	2A1.51-55 malignant endometrium, non-malignant ovary, lymph node
000120	8/2/96	54	3	2A1.72-73, 2B3.3 non-malignant ovary
000121	8/8/96	74	4	2A1.74-77 non-malignant endometrium, ovary, cervix
000122	8/13/96	50	2	2A1.66-67 non-malignant endometrium, ovary
000123	8/13/96	43	1	2A2.22 non-malignant endometrium
000124	8/13/96	35	2	*2A1.56-57 non-malignant lymph node
000125	8/14/96	36	3	2B3.4-6 non-malignant ovary, endometrium, cul-de-sac
000130	9/4/96	40	3	2A2.23-25 non-malignant endometrium, ovary
000131	9/4/96	53	3	2A2.26-28 non-malignant endometrium, ovary
000140	9/13/96	45	4	*2A2.29-32 non-malignant endometrium, ovary, fallopian tube
000145	9/18/96	77	3	2A2.33-35 malignant and non-malignant ovary, lymph node
000150	9/26/96	45	2	2A2.36-37 non-malignant ovary
000159	2/28/96	57	1	*2A2.3 non-malignant ovary
000165	10/9/96	82	2	*2A2.38-39 non-malignant ovary
000199	10/15/96	51	3	2A2.40-42 non-malignant ovary, endometrium
000200	10/16/96	46	3	*2A2.43-45 non-malignant ovary, endometrium

Normal Breast Tissue

Bar Code	Date of Procedure	Age of Patient	# Vials	Sample Location
100010	6/5/95	26	4	1B1.6-9*
000086	4/29/96	29	4	1B2.9, 1B3.1-3
000163	4/19/96	28	2	1B4.7-8*
000183	3/12/96	20	2	1B4.9, 1B5.1*
000092	5/13/96	27	2	1B3.4-5
000156	7/23/96	31	1	1B4.1*
000184	3/18/96	17	2	1B5.2-3*
000161	5/24/96	50	2	1B5.4-5*
000162	6/3/96	42	2	1B5.6-7*

Blood Serum

Bar Code	Date of Procedure	Age of Patient	# Vials	Sample Location	Sample Class
100000	5/12/95	72	4	1C1.12-15	Breast Cancer
100001	5/17/95	76	3	1C1.25-27	Breast Cancer
100002	5/19/95	51	2	1C1.1-2	Fibrocystic
100003	5/22/95	59	3	1C1.3-5	Fibrocystic
100004	5/22/95	68	3	1C1.6-8	Breast Cancer
100005	5/22/95	54	3	1C1.9-11	Breast Cancer
100006	5/24/95	57	3	1C1.16-18	Breast Cancer
100009	6/5/95	46	3	1C1.22-24	*Breast Cancer
100011	6/5/95	28	3	1C1.19-21	Breast Cancer
100012	7/10/95	78	3	1C1.28-30	Breast Cancer
100013	7/19/95	56	3	1C1.35-37	Breast Cancer
100014	7/12/95	60	3	1C1.32-34	Breast Cancer (7 primaries)
100015	7/19/95	43	2	1C1.38-39	Breast Cancer
100016	8/11/95	39	3	1C1.41-43	Fibrocystic
100017	8/30/95	68	3	1C1.52-54	Breast Cancer
100019	8/16/95	42	3	1C1.48-50	Breast Cancer
100020	8/16/95	52	1	1C1.51	Breast Cancer
100022	9/8/95	47	4	1C1.55-58	Breast Cancer
000001	9/6/95	45	3	1C1.65-67	Fibrocystic
000002	9/8/95	51	2	1C1.70-71	Fibrocystic
000003	9/8/95	71	1	1C1.72	Breast Cancer
000004	9/1/95	60	4	1C2.43-46	Breast Cancer
000005	9/13/95	46	3	1C1.75-77	Breast Cancer
000006	9/13/95	70	2	1C1.78-79	Breast Cancer
000010	9/22/95	52	2	1C1.80-81	Fibrocystic
000011	9/25/95	60	3	1C2.3-5	Breast Cancer
000012	10/2/95	64	3	1C2.7-9	Fibrocystic
000013	10/18/95	77	3	1C2.11-13	Fibrocystic
000015	11/8/95	44	3	1C2.16-18	Breast Cancer
000016	11/8/95	42	3	1C2.19-21	Fibrocystic
000017	10/24/95	43	3	1C2.22-24	Breast Cancer
000018	11/21/95	42	2	1C2.25-26	Breast Cancer
000019	11/27/95	52	3	1C2.31-33	Breast Cancer
000020	11/17/95	44	1	1C2.34	Fibrocystic
000021	11/17/95	53	3	1C2.35-37	Fibrocystic
000022	8/9/95	65	3	1C1.61-63	Fibrocystic
000023	11/21/95	31	3	1C2.39-41	Breast Cancer
000025	12/6/95	49	3	1C2.49-51	*Breast Cancer
000026	12/6/95	59	3	1C2.53-55	*Breast Cancer
000027	12/8/95	33	3	1C2.57-59	Fibrocystic
000028	11/22/95	76	2	1C2.75-76	Breast Cancer
000029	12/18/95	59	3	1C2.66-68	Breast Cancer
000030	12/20/95	22	3	1C2.61-63	Fibrocystic
000031	12/20/95	58	3	1C2.69-71	Breast Cancer
000032	12/29/95	55	3	1C3.11-13	Breast Cancer
000033	9/22/95	36	3	1C2.77-79	Breast Cancer
000034	1/10/96	72	3	1C3.3-5	Breast Cancer
000035	12/27/95	46	3	1C3.7-9	Breast Cancer
000037	1/22/96	65	2	2C1.2-3	Endometrial Cancer

000038	1/24/96	42	3	2C1.5-7	Ovarian Cancer
000039	1/26/96	44	3	1C3.22-24	*Breast Cancer
000040	1/29/96	47	3	1C3.26-28	Breast Cancer
000041	11/29/95	42	3	1C3.65-67	Fibrocystic
000042	1/30/96	42	3	2C1.9-11	Endometritis, adenomyosis
000043	1/30/96	34	3	2C1.13-15	Cervical Cancer
000044	1/31/96	46	3	2C1.17-19	Post-menopausal bleeding
000045	2/6/96	28	2	2C1.21-22	Squamous cell cancer of cervix
000046	2/7/96	54	6	2C1.24-26,62-64	non-malignant endometrium
000047	2/8/96	11	3	2C1.28-30	Ovarian Cancer
000048	2/8/96	53	3	2C1.32-34	Ovarian Cancer with metastasis in peritoneum
000050	2/16/96	55	3	2C1.36-38	Endometrial carcinoma in situ
000051	2/16/96	37	3	2C1.40-42	non-malignant ovary, endometrium
000052	2/21/96	49	3	2C1.44-46	non-malignant endometrium, non-malignant ovary
000053	2/27/96	72	3	2C1.48-50	*Prolapsed uterus
000054	2/27/96	62	5	2C1.52-56	*Pelvic mass
000055	2/27/96	33	3	2C1.58-60	Cervical dysplasia
000056	2/21/96	31	2	1C4.10-11	Fibrocystic
000057	3/27/96	53	3	1C4.13-15	Breast Cancer - (recurrent (ductal carcinoma in situ)
000059	3/5/96	56	3	2C1.66-68	Endometrial thickening (breast cancer 5/92)
000061	3/12/96	37	3	2C1.70-72	*Menorrhagia
000062	3/4/96	68	3	1C4.25-27	Fibrocystic
000064	3/15/96	56	3	1C3.29-31	Breast Cancer
000065	3/20/96	33	3	2C1.74-76	Ruptured fallopian tube
000066	3/25/96	25	3	1C3.15-17	Fibrocystic
000067	3/25/96	35	3	2C1.78-80	Endometriosis
000069	3/26/96	53	3	2C2.1-3	*Ovarian Cancer with metastasis in peritoneum
000071	4/2/96		3	2C2.5-7	Non-malignant Endometrium
000072	4/2/96	43	2	2C2.9-10	Ovarian Cancer
000073	9/25/95	48	3	1C3.32-34	Fibrocystic
000075	4/16/96	58	3	2C2.12-14	Endometrial Cancer
000079	4/22/96	68	3	2C2.16-18	Endometrial Polyps
000080	4/15/96	34	2	1C3.46-47	Breast Cancer
000082	4/22/96	59	2	1C3.49-50	Fibrocystic
000085	4/22/96	57	3	1C3.52-54	Breast Cancer
000087	5/6/96	41	2	2C2.20-21	Endometriosis
000088	5/7/96	37	3	2C2.23-25	Borderline ovarian cystadenoma
000089	5/8/96	70	3	2C2.27-29	*Ovarian Cancer
000090	5/14/96	36	3	2C2.34-36	Cervical Cancer
000091	1/19/96	64	3	1C3.69-71	Breast Cancer
000092	5/13/96	27	3	1C3.73-75	Breast Reduction
000093	6/5/96	62	3	1C3.77-79	Breast Cancer
000094	5/28/96	37	3	2C2.38-40	Endometriosis
000095	5/22/96	51	3	1C3.63,80-81	Microcalcifications
000096	5/20/96	33	3	1C4.2-4	Fibrocystic
000097	6/5/96	32	3	2C2.42-44	Non-malignant Cervix
000098	6/5/96	30	3	2C2.46-48	Non-malignant Other
000100	6/18/96	45	3	2C2.50-52	Malignant endometrium, non-malignant endometrium, ovary, lymph node
000101	6/19/96	65	3	2C2.54-56	Non-malignant Ovary
000102	7/1/96	69	1	1C4.6	Non-malignant breast (with dcis)

000103	7/2/96	40	3	2C2.58-60	Malignant Cervix, non-malignant endometrium, ovary, lymph node
000108	7/5/96	69	3	2C2.62-64	* Non-malignant ovary and fallopian tube
000110	7/9/96	56	3	2C2.66-68	Non-malignant endometrium, ovary, lymph node
000111	4/3/96 7/3/96	55	2	1C4.17-18	Malignant Breast Non-malignant ovary
000112	7/11/96	49	3	2C2.70-72	* Non-malignant ovary, lymph node
000113	7/12/96	41	3	2C2.74-76	Non-malignant ovary
000114	7/15/96	30	3	2C2.78-80	Non-malignant endometrium
000118	7/24/96	52	3	2C3.1-3	* Non-malignant ovary
000119	7/30/96	63	3	2C3.5-7	Malignant endometrium, non-malignant ovary, lymph node
000120	8/2/96	54	3	2C3.9-11	Non-malignant ovary
000121	8/8/96	74	3	2C3.13-15	Non-malignant endometrium, ovary, cervix
000122	8/13/96	50	3	2C3.16-18	Non-malignant endometrium, ovary
000123	8/13/96	43	3	2C3.19-21	Non-malignant endometrium
000127	9/4/96	62	2	1C4.7-8	Malignant Breast
000129	8/26/96	25	3	1C4.21-23	Non-malignant Breast
000130	9/4/96	40	2	2C3.23-24	Non-malignant endometrium, ovary
000131	9/4/96	53	3	2C3.27-29	Non-malignant endometrium, ovary
000134	9/4/96	44	3	1C4.33-35	Malignant Breast
000137	9/9/96	47	3	1C4.41-43	Non-malignant Breast
000138	9/4/96	39	3	1C4.29-31	*Non-malignant Breast
000139	9/9/96	47	3	1C4.45-47	Malignant Breast
000140	9/13/96	45	3	2C3.31-33	* Non-malignant endometrium, ovary, fallopian tube
000141	9/16/96	41	3	1C4.37-39	*Malignant Breast
000142	9/23/96	43	5	1C4.49-53	Malignant Breast
000144	9/16/96	27	3	1C4.55-57	Non-malignant Breast
000145	9/18/96	77	3	2C3.35-37	Malignant and non-malignant ovary, lymph node
000147	9/18/96	73	3	1C4.59-61	Non-malignant Breast (with DCIS)
000150	9/26/96	45	3	2C3.39-41	Non-malignant ovary
000152	10/2/96	36	3	1C4.63-65	Malignant Breast
000153	10/1/96	27	3	2C3.43-45	*Cervical Cancer
000158	9/30/96	33	3	1C4.67-69	*Non-malignant Breast (with DCIS)
000165	10/9/96	82	3	2C3.47-49	*Non-malignant ovary
000199	10/15/96	51	3	2C3.51-53	Non-malignant ovary,endometrium
000200	10/16/96	46	3	2C3.55-57	*Non-malignant ovary,endometrium

Lymphocytes

Bar Code	Date of Procedure	Age of Patient	# Vials	Sample Location	Sample Class
100014	7/12/95	60	1	1C1.31, 40	Breast Cancer
100016	8/11/95	39	1	1C1.44	Fibrocystic
100017	8/14/95	68	1	1C1.45	Breast Cancer
100019	8/16/95	42	1	1C1.47	Breast Cancer
100020	8/16/95	52	1	1C1.46	Breast Cancer
000022	8/9/95	65	1	1C1.60	Fibrocystic
100022	9/8/95	47	1	1C1.59	Breast Cancer
000001	9/6/95	45	1	1C1.64	Fibrocystic
000002	9/8/95	51	1	1C1.68	Fibrocystic
000003	9/8/95	71	1	1C1.69	Breast Cancer
000004	9/1/95	60	1	1C2.42	Breast Cancer
000005	9/13/95	46	1	1C1.73	Breast Cancer
000006	9/13/95	70	1	1C1.74	Breast Cancer
000010	9/22/95	52	1	1C2.1	Fibrocystic
000011	9/25/95	60	1	1C2.2	Breast Cancer
000012	10/2/95	64	1	1C2.6	Fibrocystic
000013	10/18/95	77	1	1C2.10	Fibrocystic
000015	11/8/95	44	1	1C2.14	Breast Cancer
000016	11/8/95	42	1	1C2.15	Fibrocystic
000017	10/24/95	43	1	1C2.27	Breast Cancer
000018	11/21/95	42	1	1C2.47	Breast Cancer
000019	11/27/95	52	1	1C2.28	Breast Cancer
000020	11/17/95	44	1	1C2.29	Fibrocystic
000021	11/17/95	53	1	1C2.30	Fibrocystic
000023	11/21/95	31	1	1C2.38	Breast Cancer
000025	12/6/95	49	1	1C2.48	*Breast Cancer
000026	12/6/95	59	1	1C2.52	*Breast Cancer
000027	12/8/95	33	1	1C2.56	Fibrocystic
000028	11/22/95	76	1	1C2.81	Breast Cancer
000029	12/18/95	59	1	1C2.64	Breast Cancer
000030	12/20/95	22	1	1C2.60	Fibrocystic
000031	12/20/95	58	1	1C2.65	Breast Cancer
000032	12/29/95	55	1	1C3.10	Breast Cancer
000033	9/22/95	36	1	1C3.1	Breast Cancer
000034	1/10/96	72	1	1C3.2	Breast Cancer
000035	12/27/95	46	1	1C3.6	Breast Cancer
000037	1/22/96	65	1	2C1.1	Endometrial Cancer
000038	1/24/96	42	1	2C1.4	Ovarian Cancer
000039	1/26/96	44	1	1C3.21	*Breast Cancer
000040	1/29/96	47	1	1C3.25	Breast Cancer
000041	11/29/95	42	1	1C3.64	Fibrocystic
000042	1/30/96	42	1	2C1.8	Endometritis, adenomyosis
000043	1/30/96	34	1	2C1.12	Cervical Cancer
000044	1/31/96	46	1	2C1.16	Post-menopausal bleeding
000045	2/6/96	28	1	2C1.20	(squamous cell cancer of cx)
000046	2/7/96	54	2	2C1.23,61	non-malignant endometrium
000047	2/8/96	11	1	2C1.27	malignant ovary

000048	2/8/96	53	1	2C1.31	(ovarian cancer)
000050	2/16/96	55	1	2C1.35	in situ carcinoma endometrium
000051	2/16/96	37	1	2C1.39	(ovarian mass)
000052	2/21/96	49	1	2C1.43	non-malignant endometrium, non-malignant ovary
000053	2/27/96	72	1	2C1.47	*Prolapsed uterus
000054	2/27/96	62	1	2C1.51	*Pelvic mass
000055	2/27/96	33	1	2C1.57	Cervical dysplasia
000056	2/21/96	31	1	1C4.9	Fibrocystic
000057	3/27/96	53	1	1C4.12	Breast Cancer - (recurrent ductal carcinoma in situ)
000059	3/5/96	56	1	2C1.65	Endometrial thickening (breast cancer 5/92)
000061	3/12/96	37	1	2C1.69	*Menorrhagia
000062	3/4/96	68	1	1C4.24	Fibrocystic
000064	3/15/96	56	1	1C3.18	Breast Cancer
000065	3/20/96	33	1	2C1.73	Ruptured fallopian tube
000066	3/25/96	25	1	1C3.14	Fibrocystic
000067	3/25/96	35	1	2C1.77	Endometriosis
000069	3/26/96	53	1	2C1.81	*Ovarian Cancer with metastasis in peritoneum
000071	4/2/96		1	2C2.4	Non-malignant Endometrium
000072	4/2/96	43	1	2C2.8	Ovarian Cancer
000073	9/25/95	48	1	1C3.19	Fibrocystic
000075	4/16/96	58	1	2C2.11	Endometrial Cancer
000079	4/22/96	68	1	2C2.15	Endometrial Polyps
000080	4/15/96	34	1	1C3.45	Breast Cancer
000082	4/22/96	59	1	1C3.48	Fibrocystic
000085	4/22/96	57	1	1C3.51	Breast Cancer
000087	5/6/96	41	1	2C2.19	Endometriosis
000088	5/7/96	37	1	2C2.22	Borderline ovarian cystadenoma
000089	5/8/96	70	1	2C2.26	*Ovarian Cancer
000090	5/14/96	36	1	2C2.33	Cervical Cancer
000091	1/19/96	64	1	1C3.68	Breast Cancer
000092	5/13/96	27	1	1C3.72	Breast Reduction
000093	6/5/96	62	1	1C3.76	Breast Cancer
000094	5/28/96	37	1	2C2.37	Endometriosis
000095	5/22/96	51	1	1C3.62	Microcalcifications
000096	5/20/96	33	1	1C4.1	Fibrocystic
000097	6/5/96	32	1	2C2.41	Non-malignant Cervix
000098	6/5/96	30	1	2C2.45	Non-malignant Other
000100	6/18/96	45	1	2C2.49	Malignant endometrium, non-malignant endometrium, ovary, lymph node
000101	6/19/96	65	1	2C2.53	Non-malignant Ovary
000102	7/1/96	69	1	1C4.5	Non-malignant Breast (with DCIS)
000103	7/2/96	40	1	2C2.57	Malignant Cervix, non-malignant endometrium, ovary, lymph node
000108	7/5/96	69	1	2C2.61	* Non-malignant ovary and fallopian tube
000110	7/9/96	56	1	2C2.65	Non-malignant endometrium, ovary, lymph node
000111	4/3/96 7/3/96	55	1	1C4.16	Malignant Breast
000112	7/11/96	49	1	2C2.69	* Non-malignant ovary, lymph node
000113	7/12/96	41	1	2C2.73	Non-malignant ovary
000114	7/15/96	30	1	2C2.77	Non-malignant endometrium
000118	7/24/96	52	1	2C2.81	* Non-malignant ovary
000119	7/30/96	63	1	2C3.4	Malignant endometrium, non-malignant ovary, lymph node

000120	8/2/96	54	1	2C3.8	Non-malignant ovary
000121	8/8/96	74	1	2C3.12	Non-malignant endometrium, ovary, cervix
000127	9/4/96	62	1	1C4.19	Malignant Breast
000129	8/26/96	25	1	1C4.20	Non-malignant Breast
000130	9/4/96	40	1	2C3.22	Non-malignant endometrium, ovary
000131	9/4/96	53	1	2C3.26	Non-malignant endometrium, ovary
000134	9/4/96	44	1	1C4.32	Malignant Breast
000137	9/9/96	47	1	1C4.40	Non-malignant Breast
000138	9/4/96	39	1	1C4.28	*Non-malignant Breast
000139	9/9/96	47	1	1C4.44	Malignant Breast
000140	9/13/96	45	1	2C3.30	* Non-malignant endometrium, ovary, fallopian tube
000141	9/16/96	41	1	1C4.36	*Malignant Breast
000142	9/23/96	43	1	1C4.48	Malignant Breast
000144	9/16/96	27	1	1C4.54	Non-malignant Breast
000145	9/18/96	77	1	2C3.34	Malignant and non-malignant ovary, lymph node
000147	9/18/96	73	1	1C4.58	Non-malignant Breast (with DCIS)
000150	9/26/96	45	1	2C3.38	Non-malignant ovary
000152	10/2/96	36	1	1C4.62	Malignant Breast
000153	10/1/96	27	1	2C3.42	*Cervical Cancer
000158	9/30/96	33	1	1C4.66	*Non-malignant Breast (with DCIS)
000165	10/9/96	82	1	2C3.46	*Non-malignant ovary
000199	10/15/96	51	1	2C3.50	Non-malignant ovary,endometrium
000200	10/16/96	46	1	2C3.54	*Non-malignant ovary,endometrium

* Indicates no written consent currently available